

Printed By: Tammy Kendall
On: 11/22/2004 At: 09:07 am

RECEIPT

Receipt Number 05-009496

Department of Ecology (4610) Manual Receipt
PO Box 5128
Lacey, WA 98509-5128
(360) 407-7095

Current Document Number 461H2531CJ Date 11/23/2004 FM 17

Remitter Name COOK, CYNTHIA L Receipt Name

Check/Draw Number 4622
Document Amount \$5.00
Method of Payment Check
Comment Description WATER RIGHTS

Ref Doc Nr	Ref Doc Sfx	Inv Nr	Id Nr	Sub Id Nr	Prgm Cd	T C	R	Fund	Maj Grp	Maj Src	Sub Src	Cnty	Work Cls	PIC	AI	Org	Prj	Sub Prj	Prj Phs	Sub Obj	Sub Sub Obj	Var GL	Sub Sid Dr	Sub Sid Cr	Alloc Amt
								H00	001		001	02	85	000010											\$5.00

11/29/04
ok for permit
JH



STATE OF WASHINGTON

DEPARTMENT OF ECOLOGY

P.O. Box 47775 • Olympia, Washington 98504-7775 • (360) 407-6300

November 2, 2004

Richard & Cynthia Lahti
PO Box 8
Grays River WA 98621

Dear Mr. & Mrs. Lahti:

RE: Water Right Permit No. **S2-29248**

On **August 10, 2004**, this office sent you Reports of Examination approving your applications and requesting that you submit the statutory permit fee of **\$5.00** payable to the Department of Ecology. To date, we have not received this fee.

If we do not receive the permit fee within **thirty (30) days** from receipt of this letter, we will assume you are no longer interested in the development your project.

If you have any questions regarding the above application, please contact Sheri Carroll at (360) 407-0240 or myself at (360) 407-0270.

Sincerely,

A handwritten signature in cursive script, appearing to read "Teresa Hanson".

Teresa Hanson
Water Resources Program

TH:th (roereminder1.doc



STATE OF WASHINGTON

DEPARTMENT OF ECOLOGY

P.O. Box 47775 • Olympia, Washington 98504-7775 • (360) 407-6300

August 10, 2004

CERTIFIED MAIL

Richard and Cynthia Lahti
PO Box 8
Grays River WA 98621

Dear Mr. & Mrs. Lahti:

RE: Ground Water Application No. **S2-29248**

Your application is approved. Enclosed is the Report of Examination (Ecology's Order and Determination) which summarizes our findings and represents our final decision. Please read through this report carefully, as it forms the basis for your permit.

Send permit fee

Your permit will be issued after the required 30-day appeal period, and upon receipt of the **\$5.00** permit fee. Please send the following to the Water Resources Program at Ecology's Southwest Regional Office:

- The **\$5.00** permit fee; a check or money order made out to the Department of Ecology, and
- The completed Water Right Permit Fee Form (enclosed).
 - If appropriate, make corrections to your name and address in the space provided.

Your right to appeal

This Order may be appealed pursuant to RCW Chapter 43.21B. The person to whom this Order is issued must file an appeal with the Pollution Control Hearings Board **within thirty (30) days of receipt of this Order**. Send the appeal to: Pollution Control Hearings Board, P.O. Box 40903, Olympia, Washington 98504-0903. At the same time, a copy of the appeal **must** be sent to: Department of Ecology, Water Resources Appeals Coordinator, P.O. Box 47600, Olympia, Washington 98504-7600. All others receiving notice of this Order must file an appeal with the Pollution Control Hearings Board **within thirty (30) days of the date the Order was received** in the same manner described above.

If we can provide any further assistance, please contact our office at (360) 407-6300.

Sincerely,

Thomas Loranger
Water Resources Section Manager
Southwest Regional Office

TL:th

Enclosures: Report of Examination
Water Right Permit Fee Form
"Your Right to Be Heard"

ROE, permit fee.doc



U.S. Postal Service™
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OFFICIAL USE

Postage \$
 Certified Fee
 Return Receipt Fee (Endorsement Required)
 Restricted Delivery Fee (Endorsement Required)
 Total Postage & Fees \$

Sent To
 Street, Apt. No.
Richard & Cynthia Lahti

7003 1680 0002 1621 8827

DEPARTMENT OF ECOLOGY
 SOUTHWEST REGIONAL OFFICE
 POST OFFICE BOX 47775
 OLYMPIA, WA 98504-7775

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:
RICHARD & CYNTHIA LAHTI
PO BOX 8
GRAYS RIVER WA 98621

2. Article Number
7003 1680 0002 1621 8827

PS Form 3811, August 2001

COMPLETE THIS SECTION ON DELIVERY

A. Signature
 x *Cynthia Cook Lahti*

B. Received by (Printed Name)
Cynthia Cook Lahti

C. Date of Delivery
8/16/04

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☒ No

3. Service Type
☒ Certified Mail ☐ Express Mail
☐ Registered ☐ Return Receipt for Merchandise
☐ Insured Mail ☐ C.O.D.

4. Restricted Delivery? (Extra Fee) ☐ Yes

SWRO/WR S2-29248

102595-02-M-1540